

AMENDMENTS TO THE SPECIFICATION:

Please replace the paragraph beginning at page 4, line 23 with the following amended paragraph:

~~FIG. 5 shows~~ FIGS. 5A and 5B depict a flow chart illustrating a method executable on the system of FIG. 1 for imaging tumors.

Please replace the paragraph beginning at page 9, line 5 with the following amended paragraph:

FIGS. 5A and 5B ~~FIG. 5,~~ in conjunction with FIGS. 1 and 2, ~~show~~ depict a method 100 executable on the system 10 of FIG. 1 for imaging tumors, such as the tumor 12 located on the forehead region 14 of the patient 16. The method 100 provides one or more images of the tumor 12 that exhibit improved contrast, so that a surgeon can demarcate and remove the tumor 12, while at the same time, the method 100 minimizes the unnecessary removal of healthy normal tissue surrounding the tumor 12.

Please replace the paragraph beginning at page 12, line 1 with the following amended paragraph:

Referring again to FIG. 5B ~~[[5]]~~, in conjunction with FIGS. 1 and 2, at step 136, a second Mohs layer (not shown) of the tumor 12 is excised along the marked boundary in a similar manner as described above with respect to step 120. Although not specifically shown, it should be understood that the second Mohs layer typically includes a relatively thin sheet of skin

including at least a second portion of the dermis layer. At step 138, the excised second Mohs layer of the tumor 12 is frozen by immersing the second Mohs layer in the predetermined freezing solution, as similarly described above with respect to step 122. At step 140, the frozen second Mohs layer is imaged using a microscope to provide a fourth tumor image (not shown). Although the fourth tumor image is not specifically shown, the fourth tumor image may be similar to the second tumor image (FIG. 3B), if cellular anomalies (e.g., BCC) are still present. At step 142, the enhanced third tumor image, which corresponds to the enhanced third tumor image of FIG. 4B, is compared to the fourth tumor image to confirm whether cellular anomalies are still present. It should be understood that the above described method 100 may be cyclically repeated for removing successive layers of tissue until it is determined that cellular anomalies (e.g., BCC) are no longer present.